# More Than 34,000 Deaths Reported to VAERS Following COVID-19 Vaccination



Data from the Vaccine Adverse Event Reporting System (VAERS) released today show <u>1,521,347</u> adverse events were reported between Dec. 14, 2020, and Feb. 10, 2023, attributed to COVID-19 vaccines. This includes <u>282,004</u> reports of serious injuries and <u>34,385</u> deaths.

Of the 34,385 reported deaths, <u>21,553 cases</u> are attributed to Pfizer, <u>9,664</u> to Moderna, <u>2,948</u> to Johnson & Johnson, and <u>0</u> to Novavax. Of the <u>reported deaths</u>, <u>9%</u> occurred within 24 hours of vaccination, and <u>13%</u> occurred within 48 hours of vaccination.

VAERS is a voluntary reporting system co-managed by the U.S. Food and Drug Administration and Centers for Disease Control and Prevention (CDC) designed to detect vaccine safety signals.

Excluding "foreign reports" to VAERS, 936,484 adverse events,

including <u>16,903 deaths</u> and <u>100,687 serious injuries</u>, were reported in the U.S. between Dec. 14, 2020, and Feb. 10, 2023.

Foreign reports are reports from foreign subsidiaries sent to U.S. vaccine manufacturers. Under FDA regulations, if a manufacturer is notified of a foreign case report describing an event that is both serious and does not appear on the product's labeling, the manufacturer must submit the report to VAERS.

In the U.S., 669.5 million <u>COVID-19 vaccine doses</u> had been administered as of Feb. 8, including 400 million doses of Pfizer, 251 million doses of Moderna, 19 million doses of Johnson & Johnson, and 78,000 doses of Novavax.

### **Bivalent Booster Data**

As of Feb. 15, <u>53 million people</u> received an untested, updated bivalent booster dose targeting the no-longer-existing Wuhan strain and obsolete BA.4/BA.5 omicron subvariants.

Between the rollout of bivalent boosters in September 2022 and Feb. 10, 22,543 adverse events have been reported to VAERS, with 39% attributed to Moderna's booster and 61% attributed to Pfizer/BioNTech. The data included 184 deaths, 1,561 serious injuries, and 67 reports of myocarditis and pericarditis (heart inflammation).

Note the CDC uses a <u>narrowed case definition</u> of "myocarditis," which allows them to exclude cases of cardiac arrest, ischemic strokes, and deaths due to heart problems that occur before one has the chance to go to the hospital, obtain a diagnosis, or "dies suddenly."

To meet the case definition of myocarditis, people must have had "symptoms such as chest pain, shortness of breath and feelings of having a fast-beating, fluttering or pounding heart, and medical tests to support the diagnosis of myocarditis and rule out other causes." The CDC website does not state what happens to these cases, but there is no indication they are tracked or included in the CDC's myocarditis numbers. The CDC has also removed numerous reports of myocarditis from the system.

According to the CDC, VAERS data <u>available to the</u> <u>public</u> include the initial reports to VAERS. Any updates or corrections to reports during follow-up are used by the government for analysis but are not made available to the public. In other words, we may see an initial report for a heart problem that later leads to death, but we will not see an updated report if a person dies, nor will that death be included in the statistics.

## Data for 6-month-olds to 5-year-olds

- <u>5,790 adverse events</u>, including <u>246 cases rated as</u> <u>serious</u> and <u>13 reported deaths</u>.
- <u>5 reports</u> of myocarditis and pericarditis.
- <u>35 reports</u> of blood clotting disorders.
- <u>58 reports</u> of seizures.

### Data for 5- to 11-year-olds

- <u>16,957 adverse events</u>, including <u>814 rated as</u> serious and <u>33 reported deaths</u>.
- <u>48 reports</u> of myocarditis and pericarditis.
- <u>75 reports</u> of blood clotting disorders.
- <u>192 reports</u> of seizures.

#### Data for 12- to 17-year-olds

- <u>41,410 adverse events</u>, including <u>4,614 rated as</u> <u>serious</u> and <u>138 reported deaths</u>.
- <u>276 reports</u> of anaphylaxis among 12- to 17-year-olds

where the reaction was life-threatening, required treatment, or resulted in death.

- <u>1,349 reports</u> of myocarditis and pericarditis, with <u>1,182 cases</u> attributed to Pfizer's vaccine.
- <u>310 reports</u> of blood clotting disorders, with <u>283</u>
   <u>cases</u> attributed to Pfizer.
- <u>31 cases</u> of postural orthostatic tachycardia syndrome (POTS) were attributed to Pfizer's vaccine.

#### Data for all age groups to VAERS

- 16% of deaths were related to cardiac disorders.
- 53% of those who <u>died were male</u>, and 41% <u>were female</u>. The remaining death reports do not list the gender of the deceased.
- The <u>average age</u> of death was 72.
- As of Feb. 10, <u>8,983 pregnant women</u> reported adverse events related to COVID-19 vaccines, including <u>5,202</u> <u>reports</u> of miscarriage or premature birth.
- Of the <u>17,050 cases of Bell's palsy</u> reported, 73% were attributed to Pfizer vaccinations, <u>22% to Moderna</u>, and <u>5% to J&J</u>.
- <u>3,209 reports</u> of Guillain-Barré syndrome.
- <u>10,365 reports</u> of anaphylaxis where the reaction was life-threatening, required treatment or resulted in death.
- <u>8,405 reports</u> of myocardial infarction and cardiac arrest.
- <u>45,754 reports</u> of blood-clotting disorders. Of those, <u>31,405 reports</u> were attributed to Pfizer, <u>10,343</u> reports to Moderna, and <u>3,930 reports</u> to Johnson & Johnson.
- <u>25,318 cases</u> of myocarditis and pericarditis, with <u>19,208 cases</u> attributed to Pfizer, <u>5,614 cases</u> to Moderna, and <u>439</u> to Johnson & Johnson.
- <u>78 cases</u> of Creutzfeldt-Jakob disease, with <u>64</u>

cases attributed to Pfizer, <u>12</u> to Moderna, and <u>2</u> to J&J. • <u>679 cases</u> of POTS, with <u>502 cases</u> attributed to
Pfizer, <u>150 cases</u> to Moderna, and <u>26 cases</u> to Johnson &
Johnson.

VAERS is <u>estimated</u> to represent only 1% of actual adverse events. Submitted reports require further investigation before a causal relationship can be confirmed; however, U.S. regulatory agencies neither properly investigate nor acknowledge causal relationships between adverse events and COVID-19 vaccines.

Although healthcare providers are required by law to report vaccine adverse events to VAERS, research shows very few do. It is essential that anyone who experiences an adverse event <u>report their own injury</u>.